resting Scheme for HIV Serology

Ref No .:

Date: 24/09/22

PROFICIENCY TESTINGREPORT (SRL to ICTCs/Blood banks)

Round: I

Name of Proficiency Testing Provider: NRL, NARI-Pune

Date Panel Distributed: 16/09/22

Name of the participating laboratory: EO-121 CTC-2, ASILO HOSPITAL Date results received: 24/09/22

Sample Code	Standard Result	Results obtained by participating laboratory	% Matching	
Α	Reactive	Reactive	100%	
B Non Reactive		Non Reactive	100%	
С	Non Reactive	Non Reactive	100%	
D	Non Reactive	Non Reactive	100%	

Keyword: R: Reactive, NR: Non reactive

Remarks: Performance is Satisfactory / Unsatisfactory

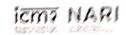
Name of Laboratory Incharge: Dr. M J W Pinte

Signature of Laboratory Incharge

Date: 24/09/22

***End of Report ***

DR. MARIA JOSE W. PINTO PROFESSOR AND HEAD DEPARTMENT OF MICROBIOLOGY GOA MEDICAL COLLEGE BAMBOLIM - GOA



PROFICIENCY TESTING FORM

Name of Proficiency Testing I	Provider: IC	CMR-NARI.	Pune
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Year: 2022 - 23 Round: 1

Date Panel Dispatched: 16 00 2022

Closing Date: 24/9/2022

Date proficiency panel received: 16/9/2022

Date of testing proficiency panel: 1940 2022

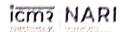
Date report sent: 13/9/22

HUMAN IMMUNODEFICIENCY VIRUS TYPE-1 (HIV-1) ANTIBODY TESTING

NOTE:

The HIV-1 performance evaluation samples are undiluted, unaltered individual donor material. It is the intention to provide laboratories with performance evaluation samples that closely resemble the types of specimens that laboratories encounter in their routine daily testing.

PT Laboratory Identification No.:	E Q -	12	
		be found on you	- /
Laboratory Name: 1CTC-2	North	District	floepital Mapusa As
Type of Laboratory: NRL/SRL/ICTO	C/PPTCT/FI-ICTC	C/PPP-ICTC/Blo	ood Bank/Private lab
Address of Laboratory (where testing	g is undertaken):	ICIC·2 No	13th Dist. Hosp. Mapus
Street: Mapusa, Basales	- Nosth (Gog.	
State: Goa Postal		-	No
E-mail: PPTCF as îlo Elgm Name of nodal officer: Dr. Va	ail·lomFax No.:		
Name of nodal officer: Dr. Va & Signature	usha Mu	anj	



PT Lab ID, No.

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KIT DETAILS

	Kit Details				
	Test I	Test II	Rapid.		
Type of Test (Rapid/ELISA/Western Blot)	Rapid Comanins - Re	Rapial			
Name of the test	Corngillos - Re	v			
Manufacturer	Advantage - St N.R. F. RAY I I Traithous, I'vt. Liet.	Trientischem	Mesil biagnostic		
Lot#	4000026849	11/102/31	MI 122050		
Date of Expiry		00/2023	11 2822		
Principle of the test	22/3/2024 Dol Immunuessau	angungebrong	2 mmunoconcent		

FINAL RESULTS

Banal Hampla IB		Final		
Paner Sample 1D	Test I	Test II	Test III	Interpretation
(-)	R CI-5.0	R HIV-1	RHIV-1	Positive forth
В	NR			Negative
C	NR		_	Negative
	NR		_	Negative
		A Rest I R CL-5.0 B NR C NR	Test I REL-5.0 R HIV-1 B NR C NR -	Panel Sample II) Test I Test II Test III R 21-5.6 R HIV-1 R HIV-1 B NR C NR

R: Reactive; NR: Nonreactive; P: Positive; I: Indeterminate; N: Negative

Remarks (if any):

Rishel gownkies

Signature of Technician Date: 17109 12021

REDMINOTE 9 PRO

AI QUAD CAMERA

Signature of Nodal Officer Date: Senior Pathologist

North District Hospital,

Mapusa - Goa



GENERAL INSTRUCTIONS

Please read all instructions completely before testing.

Fill relevant pages and record all information legibly within the appropriate spaces.

Enter EQAS laboratory identification number in the boxes provided. Your EQAS number is present on the panel box containing proficiency panel.

Perform the test procedure (s) in the same manner as the routine samples following NACO Strategy

Do not report for more than three tests.

As far as possible use the kits provided by NACO and follow all the instructions as per kit insert.

Enter in the spaces provided the last two digits of the sample code that appears on each vial, e.g.

02 01

Wherever differentiating kits are used, kindly specify the results as HIV-1/HIV-2/HIV-1+2.

Prior to use, allow samples to reach room temperature (18-30°C).

Spin the samples before testing to avoid the interference of turbidity in the test results.

All samples should be treated as potentially infectious and should be handled using Universal Safety precautions.

Results should be sent within eight days after receiving the panel.

If the samples cannot be tested for any reason (eg. Unavailability of kits) store the samples at -20

Any clarification required regarding EQAS programme, please contact the PT provider at the following address.

Address of Proficiency Testing Provider

ICMR-NATIONAL AIDS RESEARCH INSTITUTE Plot No. 73, 'G' Block, MIDC, Bhosari, Pune-411026

: 020-27331200 Phone No. : 020-27121071

Fax : ptprovidernari@gmail.com E mail

NON REPORTING CODES

REASONS FOR NOT REPOTING RESULTS CODE Test not performed in this laboratory T Samples lost or destroyed in laboratory L Test reagents not available R Insufficient sample volume to perform test Other (please specify on results form) AI QUAD CAMERA